

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:
07/07/2016
Document Number:
673503488
Overall Inspection:
SATISFACTORY

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	2A Doc Num:
	<u>217631</u>	<u>311967</u>	<u>COSTA, RYAN</u>	<input type="checkbox"/>	

Operator Information:

OGCC Operator Number:	<u>100264</u>
Name of Operator:	<u>XTO ENERGY INC</u>
Address:	<u>PO BOX 6501</u>
City:	<u>ENGLEWOOD</u>
State:	<u>CO</u>
Zip:	<u>80155</u>

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Harrison, Lyndon		lyndon_harrison@xtoenergy.com	
Trujillo, Irwin		irwin_trujillo@xtoenergy.com	
Begano, Mary	719-859-1918/719-846-2102	mary_begano@xtoenergy.com	All Inspections

Compliance Summary:

QtrQtr:	<u>SESW</u>	Sec:	<u>28</u>	Twp:	<u>33S</u>	Range:	<u>67W</u>
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Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
08/18/2010	200306084	ID	SI	SATISFACTORY			No
08/18/2010	200271213	PR	SI	SATISFACTORY			No
09/13/2000	200010507	ES	UN				No

Inspector Comment:

This inspection is to verify status of the the Plugged & Abandon wells only.

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
217631	WELL	PA	03/22/2011	GW	071-06410	GOLDEN EAGLE MINE GE-26-88	PA	<input checked="" type="checkbox"/>
217632	WELL	PA	08/11/2011	GW	071-06411	GOLDEN EAGLE MINE E-1A	PA	<input checked="" type="checkbox"/>
217633	WELL	PA	07/01/2011	GW	071-06412	GOLDEN EAGLE MINE GE-33-88	PA	<input checked="" type="checkbox"/>
217634	WELL	PA	03/21/2011	GW	071-06413	GOLDEN EAGLE MINE GE-35-88	PA	<input checked="" type="checkbox"/>
284137	WELL	PR	08/31/2006	GW	071-08749	GOLDEN EAGLE 28-14	PR	<input type="checkbox"/>
292691	PIT	CL	08/10/2011	-	-	GOLDEN EAGLE 28-14	CL	<input type="checkbox"/>
441010	SPILL OR RELEASE	CL	03/05/2015	-	-	SPILL/RELEASE POINT	CL	<input type="checkbox"/>

Corrective Action: _____	Correct Action Date: _____
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Predrill

Location ID: 217631
 Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____
S/AR: _____
 Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: _____ **Comment:** _____
CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____
CA: _____ **Date:** _____
Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:
 Name: _____ Address: _____
 Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:
 Landman Name: _____ Phone Number: _____
 Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____
 Request LGD Attendance: _____

LGD Contact Information:
 Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: <u>217631</u>	Type: <u>WELL</u>	API Number: <u>071-06410</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>217632</u>	Type: <u>WELL</u>	API Number: <u>071-06411</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>217633</u>	Type: <u>WELL</u>	API Number: <u>071-06412</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>
Facility ID: <u>217634</u>	Type: <u>WELL</u>	API Number: <u>071-06413</u>	Status: <u>PA</u>	Insp. Status: <u>PA</u>

Environmental

Spills/Releases:

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well: _____ Lat _____ Long _____
 DWR Receipt Num: _____ Owner Name: _____ GPS : _____

Field Parameters: _____

Sample Location: _____

Emission Control Burner (ECB): _____
 Comment: _____
 Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1003a. Waste and Debris removed? _____
 CM _____
 CA _____ CA Date _____

Unused or unneeded equipment onsite? _____
 CM _____
 CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? _____
 CM _____
 CA _____ CA Date _____

Guy line anchors marked? _____
 CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____

Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Inspector Name: COSTA, RYAN

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: **This inspection does not pass overall final reclamation for the location. There is an active well at the location and a separate inspection has been submitted related to the location (doc#673503479).**

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: **This inspection is to verify status of the Plugged & Abandon wells only. It appears that all the equipment associated with the PA wells has been removed. A subsequent form 6 has been submitted. There is one remaining active well on location.**

Corrective Action: _____ Date _____

Overall Final Reclamation Pass Well Release on Active Location Multi-Well Location

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment

S/A/V: _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT